Lyon & Lyon LLP Docket 271/170

DECLARATION AND POWER OF ATTORNEY Utility Application

As a below named inventor, I hereby declare that:

My	residence,	post office	address a	nd	citizenship	are	as	stated	below	next to	my	name.
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Walter L. Glomb, Jr.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first	and
joint inventor (it plural names are listed below) of the subject matter which is claimed and for which a na	tent
is sought on the invention entitled SUPERCONDUCTING PACKET SWITCH the specification of which	ace a

(Check One)	\boxtimes	is attached hereto OR	
		was filed on as United States Application Serial No International Application No and was amended on _ applicable).	_or PCT (il

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim the benefit under Title 35, United States Code § 119(e) of United States provisional application no. 60/267,236, filed February 6, 2001.

POWER OF ATTORNEY: As a named inventor, I hereby appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified invention application, all of the registered practitioners identified by Customer Number 22249 and Robert S. Mayer, Reg. No. 38,544:



PATENT TRADEMARK OFFICE

LYON & LYON LLP Suite 4700 633 W. Fifth Street Los Angeles, CA 90071

(213) 489-1600

Please direct all inquiries to Robert S. Mayer, at the above Customer Number.

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

IN\	/ENTOR'S SIGNATU			DATE 2-5	-02	
	POST OFFICE ADDRESS	1 Oakwood Circle	Ellington	State or Country CT	Zip Code 06029	
201	RESIDENCE & CITIZENSHIP	City Ellington	State or Foreign Country CT	Country of Citizenship United States		
	FULL NAME OF INVENTOR	FIRST Name Walter	MIDDLE Initial L	LAST Name Glomb		